Companion Document For

ANSI ASC X12N 834 4010A1 (Eligibility, Coverage or Benefit Information) Receipt From

Alabama Medicaid

The Health Insurance Portability and Accountability Act (HIPAA) requires that Alabama Medicaid, and all other health insurance payers in the United States, comply with the EDI standards for health care as established by the Secretary of Health and Human Services. The ANSI ASC X12N 834 implementation guides and addenda have been established as the standards of compliance for Eligibility, Coverage or Benefit Inquiry transactions. The implementation guides and addenda for each transaction are available electronically at www.wpc-edi.com.

The following information is intended to serve only as a companion document to the HIPAA ANSI ASC X12N 834 implementation guide and addenda. The table contains specific requirements to be used for processing data in the Alabama Medicaid Management Information System (AMMIS).

The use of this document is solely for the purpose of clarification. This document supplements, but does not contradict, any requirements in the ANSI ASC X12N 834 implementation guide or addenda.

Note: *The information in this document is subject to change. Please refer to the version number and effective date located in the footer of this document for the latest information available. A copy of the most current version of this companion document can be obtained from the internet at http://www.medicaid.state.al.us/HIPAA/index.htm*

ITEM #	LOOP	SEGMENT NAME	LANGUAGE
1.	-----	-------	Alabama Medicaid will send Eligibility, Coverage or Benefit Information data in upper case.
2.	-----	-------	The 834 data will utilize the basic character set as defined in Appendix A of the 834 Implementation Guide. In addition to the basic character set, the '@' symbol from the extended character set may also be utilized.
3.	-----	-------	The 834 transaction will utilize the following delimiters: tilde (~) for segment separators, asterisk (*) for data element separators, and a colon (:) for the component data element separators.
4.	-----	-------	All dates that are returned on an outgoing 834 transaction will be valid calendar dates in the appropriate format based on the respective qualifier and corresponding date format defined in the implementation guide.
5.	-----	-------	Alabama Medicaid will only return one transaction type (records group) per interchange (transmission).
6.	-----	-------	Alabama Medicaid will only return one transaction per functional group; only one ST-SE (Transaction Set) within a GS-GE (Functional Group).
7.	-----	-------	Alabama Medicaid will return only one subscriber (recipient) per transaction.
8.	-----	-------	Alabama Medicaid expects to receive a 997 (Functional Acknowledgment).
9.	-----	Interchange Control Header	'ZZ' will be populated as the Interchange ID Qualifier associated with the Interchange Sender ID.
10.	-----	Interchange Control Header	'752548221' followed by 6 spaces (to meet the minimum/maximum data element requirement of 15 bytes) will be populated as the Interchange Sender ID in ISA08.
11.	-----	Interchange Control Header	'ZZ' will be populated as the Interchange ID Qualifier associated with the Interchange Receiver ID.
12.	-----	Interchange Control Header	The Provider Submitter's ID assigned by Alabama Medicaid followed by the appropriate number of spaces to meet the minimum/maximum data element requirement of 15 bytes will be populated as the Interchange Receiver ID in ISA06.

ITEM #	LOOP	SEGMENT NAME	LANGUAGE
13.	-----	Functional Group Header	GS08 will be populated with '004010X095A1' and all changes per the addenda will be incorporated in the 834 transaction.
14.	2100A	Member Name	If a National Provider Id (NPI) has been assigned, NM108 will be populated with the value of 'XX' and NM109 will be populated with the Provider's NPI.